Multimedia Appendix 3. Full data from the review.

Study Country	Participants Symptom level at recruitment Number of recruited participants	Age (Mean, SD) Sex (% Female)	Intervention description	Peer support format Peer support type Moderation status Moderator	Design ITT	Completer (N) Dropouts (n, %)	Primary outcome measures Measurement points	Results for the effectiveness of online peer-to peer-support at post-intervention	Effect sizes and 95% confidence intervals (CI): Hedges g (between groups at post-intervention)
Depression a	nd anxiety						•		
Ellis et al. (2011) [26] Australia	Undergraduate students "Elevated" psychological distress (low to moderate) measured with the K-10. Scores > 30 excluded. N = 39 I ¹ = 13 I ^{2 peer support} = 13 C = 13	M = 19.67 SD = 1.66 F = 77%	I¹: "MoodGYM" (3 x weekly 1 hour sessions of online CBT, 5 modules plus therapist guidance) I² peer support: "Mood Garden" (3 x weekly 1 hour sessions of online peer-based support and information plus therapist guidance) C: No intervention	Message boards - Forums with blogs and mood chart Public Moderated Volunteers who experienced mood disorders	Yes	N = 39 No dropout	DASS (Depression) DASS (Anxiety) Baseline Post intervention (3 weeks)	Depression: Online peer support was not effective compared to the control condition. Anxiety: Online peer support was effective compared to the control condition.*	Depression: I ² vs C =63 Cl: -1.41, 0.16 Anxiety: I ² vs C =91 Cl: -1.72, 0.10
Horgan et al. (2013) [28]	University students	M = 20.6 SD = 1.8	I peer support: Web site provided a forum to allow participants	Forum Research	Pre-post	N = 16 n = 102 (86%)	CES-D Baseline	A non-significant reduction from pre to post-intervention.	N/A
Ireland Psychological	Depressive symptoms measured with the CED-D (score>16)	F = 35.6%	to offer peer support to each other. Information on depression and links to other supports	Moderated Researcher		202 (0070)	Post intervention (6 weeks)		

Freeman et al. (2008) [27] England	Psychological problems N = 283 I ¹ = 141 I ^{2 peer support} = 142	M = 21 SD = not reported F = 70%	I ¹ : Website containing information about common student problems I ^{2 peer support} : Website with the addition of an online mutual support group which used an electronic bulletin board	Electronic bulletin board Research Unknown Unknown	RT No	$I^{1} = 82$ $I^{2 \text{ peer support}} = 51$ $I^{1} = 59 (42\%)$ $I^{2 \text{ peer support}} = 91$ (64%)	CORE-OM Baseline Post intervention (10 weeks)	Adding online peer support did not increase the effectiveness of the intervention.	I ¹ vs I ² =22 CI: -0.57, 0.13
Eating disord	ers								
Low et al. (2006) [24] USA	Undergraduate women Non-symptomatic N=61 I ¹ = 14 I ^{2 peer support} = 19 I ^{3 peer support} = 14 C = 14	M = not reported SD = not reported F = 100%	I¹: "Student Bodies" (8 weeks webbased computer program with no discussion group) I² peer support: "Student Bodies" (8 weeks webbased computer program with an unmoderated discussion group) I³ peer support: "Student Bodies" (8 weeks webbased computer program with an unmoderated discussion group)	Discussion groups Research Unmoderated and moderated Clinical psychologist	Yes, however, only some outcomes were subject to ITT analysis. Results below pertain to the completer	N = 61 n = 11 (15%)	EDI – Bulimia, Body Dissatisfaction, and Drive for Thinness subscales Baseline Post intervention (8 weeks) Follow-up (11-12 months)	Bulimia: Adding online peer support did not increase the effectiveness of the intervention. Body Dissatisfaction: Adding online peer support did not increase the effectiveness of the intervention.	Bulimia: I^{1} vs I^{2} = .52 CI: 0.18, 1.22 I^{1} vs I^{3} = .98 CI: 0.20, 1.77 Body Dissatisfaction: I^{1} vs I^{2} = -1.05 CI: -1.84, -0.26 I^{1} vs I^{3} = .07 CI: -0.67, 0.81
			"Student Bodies" (8 weeks web-based computer program with a clinically moderated discussion group) C: No intervention		analyses.			Drive for Thinness: Adding online peer support did not increase the effectiveness of the intervention.	Drive for Thinness: I^{1} vs I^{2} =48 CI: -1.18, 0.22 I^{1} vs I^{3} =59 CI: -1.34, 0.17
Substance abuse (tobacco)									
Woodruff et al. (2001) [29]	Rural teens Smokers	M = 15 SD = not reported	I peer support: Seven 1- hour intervention chat sessions in real-time virtual	Virtual world chat room Research	Pre-post No	N = 18 n = 8 (31%)	Percentage of smoking abstinence in the past week	A non-significant increase in the percentage of smoking abstinence	N/A

USA	N = 26	F = not	world with a trained					from pre to post-	
		reported	cessation counsellor	Moderated			Baseline	intervention.	
			over a 2-month				Post intervention		
			period	Trained			(2 months)		
				cessation			Follow-up		
				counsellor			(1 month)		
Woodruff et	Adolescent	M = 16	I peer support: Seven	Virtual world	RCT	N = 102	Past-week	Online peer support	N/A
al. (2007)	smokers	SD = not	45-minute	chat room			smoking	was effective	
[25]		reported	intervention chat		Yes	n = 34 (25%)	abstinence	compared to the	
	Smokers		sessions in real-	Research			(yes vs. no)	control condition.*	
USA		F = 46%	time virtual world						
	N = 136		with a trained	Moderated			Baseline		
	I ^{1 peer support} = 77		cessation counsellor				Post-intervention		
	C = 59		over a 7-week	Trained			(7 weeks)		
			period	cessation			Follow-up		
				counsellor			(3 months)		
			C: No intervention				Follow-up		
							(12 months)		

Notes: I = intervention group, C = control group, RCT = randomized controlled trial, RT = randomized trial, CBT = cognitive behavioral therapy

Measures: DASS = Depression Anxiety Stress Scale, CES-D = Center for Epidemiologic Studies Depression Scale, EDI = The Eating Disorders Inventory, CORE-OM = The Clinical Outcomes in Routine Evaluation — Outcome Measure, K-10 = Kessler Psychological Distress Scale

^{*} Significant difference between the online peer support intervention and the control group at post-intervention